one day this week. So we haven't heard an explanation of it yet. I want an explanation of it. Just as we attempted to do our best explaining to our colleagues and to the American public what our amendment does, I think the American people ought to have an explanation right here on this floor as to what the Chafee-Domenici amendment does. That will give us a chance, perhaps, to refute some of the misinformation that is being bandied about.

As I say, I don't ascribe to anyone any intentions to go with misinformation, but I think the public and our colleagues have a right to expect us to clear up some of the confusion. So, for now I'll not say any more along that line because, as I say, Mr. CHAFEE has indicated we'll talk some tomorrow, and he indicated that he would yield to me for some comments at that time. I hope that Mr. BAUCUS and Mr. WARNER will also have a chance to comment at that time, particularly with reference to the statement by Congress Daily of today.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. ROBERTS). The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. DEWINE. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. BROWNBACK). Without objection, it is so ordered.

Mr. DEWINE. Mr. President, I further ask unanimous consent to speak for up to 45 minutes.

The PRESIDING OFFICER. Without objection, it is so ordered.

PRIVILEGE OF THE FLOOR

Mr. DEWINE. I further, Mr. President, ask unanimous consent that Wendy Selig of the staff of Representative PORTER GOSS be granted privilege of the floor during my remarks.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DEWINE. I thank the Chair.

THE RICKY RAY HEMOPHILIA RELIEF FUND ACT

Mr. DEWINE. Mr. President, I rise today to discuss a bill I have introduced. That bill is called the Ricky Ray Hemophilia Relief Fund Act. I introduced this legislation in the last Congress and again this year. I introduced it along with my distinguished colleague from Florida, Senator BOB GRAHAM. A House companion measure has been introduced by our friend, Congressman PORTER GOSS.

Mr. President, the purpose of this bill is to deal with the terrible tragedy within the hemophilia community that was brought about by the HIV contamination of the blood supply and blood products during the 1980's. A number of Americans suffered terrible harm because they relied on the Federal Government to protect the blood supply.

Mr. President, those of us who are backing this legislation believe that the Federal Government has a moral duty to help these Americans.

Let me first talk about the role of the Government in this tragedy.

The Ricky Ray Hemophilia Relief Fund Act of 1997 recognizes that the Federal Government has a responsibility for protecting the safety of the blood supply in this country and a responsibility for regulating blood products.

Mr. President, during the 1980's, our Government failed to meet this obligation to the hemophilia community of this country. The Federal Government failed in its obligation. People affected by hemophilia—children, adults, and the family members who cared for them—had a right to expect the Nation's blood supply system to work. That system relies upon many organizations, both public and private. It relies on many organizations to collect and process, distribute, monitor, and regulate the blood supply and blood products.

Unquestionably, the Federal Government bears the greatest and the ultimate responsibility for blood safety through its surveillance, research, and regulation functions. That is why, Mr. President, in 1973 the Assistant Secretary for Health announced the national—national—blood policy which then became, according to a report by the Office of Technology Assessment, ''The focal point around which blood banking policy has evolved over the last decade.''

Mr. President, this is the U.S. Government's national blood policy—the U.S. Government's national blood policy—a policy the U.S. Government undertook, a policy on which the American people should have been able to rely. The very fact that we have a national policy indicates a level of responsibility, a level of importance and involvement that we really don't see in most other areas of consumer protection. This policy is what gives the Federal Government a unique responsibility for the blood supply in this country.

Mr. President, these functions—surveillance, regulation, and research on blood—are carried out through the Public Health Service. The Centers for Disease Control hold responsibility for surveillance of potential threats to blood safety. The National Institutes of Health are responsible for biomedical research on emerging threats and improved technologies for prevention. Mr. President, these two agencies work in conjunction with the Food and Drug Administration, the FDA, which through its regulatory authority and powers of inspection, product recall, guidelines, and fines, holds primary responsibility for the safety of the blood supply and blood products under the Food, Drug and Cosmetic Act. Together, Mr. President, these agencies form the backbone of our Nation's blood safety system.

Mr. President, the awful truth is that this system failed. It failed to protect people with hemophilia or their families from deadly disease. That is why we have introduced this bill. Members of the Senate don't have to just take my word for it nor just the word of the families in the hemophilia community. Rather, in 1993, Mr. President, the Secretary of Health and Human Services opened an investigation, an investigation into the events leading to the transmission of HIV to individuals with hemophilia.

One of the key questions that was asked and that they were asked to address at the time was this: Did the Government provide an adequate and timely response to the warning signs of the 1980's, the warning signs of HIV as it related to the blood supply in this country?

The Secretary contracted with the Institute of Medicine, IOM, a private nonprofit organization that provides health policy advice under a congressional charter granted to the National Academy of Sciences. Mr. President, after 18 months of investigation, the IOM published its report in 1995. This report was entitled ''HIV and the Blood Supply: An Analysis of Crisis Decisionmaking.'' Mr. President, the report found inadequacies in the Government's effort. It found ''a failure of leadership'' that led to the HIV infection of more than one-half of the Nation's hemophilia population. This IOM report and its panel of experts from across the country found that the transmission of the HIV virus and AIDS revealed a weakness in the Federal Government's system for ensuring the safety of the Nation's blood supply.

The Institute of Medicine was specifically not charged with laying blame, but in its final report it was highly critical of the Government agencies responsible for protecting the safety of the blood system in this country. It identified several areas where the Federal Government specifically failed to curtail the impact of HIV. Mr. President, the IOM found that the Government ''consistently adopted the least aggressive options for slowing the spread of HIV within the hemophilia community.'' Let me repeat: This report, this official report, found that the Government ''consistently adopted the least aggressive options for slowing the spread of HIV within the hemophilia community.''

Time after time when decisions were made in the face of the unfolding HIV crisis, tragically, the wrong decisions were made about the blood supply. When faced with decisions about deferring donors or recalling products or testing for other known diseases, we know now that the Government officials made the wrong decisions.

Let me talk about these decisions and about what happened. First, the Federal Government failed to take adequate steps to screen blood donors. Knowing that AIDS was transmitted through blood, the Government did not